

MAR 16 2005

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **1,370.00****Complete if Known**

Application Number	09/825,489
Filing Date	04/03/2001
First Named Inventor	Agrawal
Examiner Name	T.A. Vivlemore
Art Unit	1635
Attorney Docket No.	047508.514US2 (HYZ-075)

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify: Wilmer Cutler Pickering Hale and Dorr LLP)

☒ Deposit Account Deposit Account Number: 08-0219 Deposit Account Name:

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims**      **Extra Claims**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = 0 (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: **Surcharge under 37 CFR \$1.17(t) for Petition****Fees Paid (\$)****1,370****SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	46,967	Telephone	617-526-6190
Name (Print/Type)	James T. Olesen	Date	03/14/2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Agrawal, *et al.*

Serial No.: 09/825,489

Filing Date: April 3, 2001

Title: *Sensitization of Cells to Cytotoxic Agents  
Using Oligonucleotides Directed to  
Nucleotide Excision Repair or Transcription  
Coupled Repair Genes*

Art Unit: 1635

Examiner: Vivlmore, T.A.

Atty 047508.514US2

Docket: (HYZ-075)

**CERTIFICATION UNDER 37 C.F.R. § 1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450.

*March 14, 2005*  
Date of signature and  
of mail deposit

*Mary Jo Nispel*  
Mary Jo Nispel

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**PETITION TO ACCEPT UNINTENTIONALLY DELAYED PRIORITY CLAIM**  
**UNDER 37 C.F.R. § 1.78(a)(6)**

Sir:

Applicants hereby submit this petition to accept an unintentionally delayed claim under 35 U.S.C. 119(e) for the benefit of a prior-filed provisional application, as provided under 37 C.F.R. § 1.78(a)(6). In the accompanying response under 37 C.F.R. § 1.111, Applicants have amended the specification to contain the reference to the earlier-filed provisional application, as required under 37 C.F.R. § 1.78(a)(5). Applicants further submit herewith an authorization of payment of the surcharge set forth in 37 CFR § 1.17(t), and do hereby state that the entire delay, from the date the claim of priority was due under 37 C.F.R. § 1.78(a)(5)(ii), was unintentional.

03/17/2005 YPOLITE1 00000005 080219 09825489

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Appl. No. 09/825,489  
Response. dated March 14, 2005  
Reply to Office Action of Sept. 14, 2004

Accordingly, Applicants respectfully request acknowledgement of the acceptance of their proper claim of priority to the earlier-filed provisional application 60/194,343, which was filed April 3, 2000. No further fee is believed due at this time, however please charge any additional fees, or refund any overpayment, to Deposit Account No. 08-0219.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "James T. Olesen". The signature is fluid and cursive, with the first name "James" and last name "Olesen" clearly distinguishable.

James T. Olesen, Ph.D., Reg. No. 46,967  
Attorney for Applicants

Date: **March 14, 2005**  
WILMER CUTLER PICKERING  
HALE AND DORR LLP  
60 State Street  
Boston, MA 02109  
(617) 526-6000  
(617) 526-5000 (Facsimile)